



CTC TRANSPORTATION
INSURANCE SERVICES LLC

701 Palomar Airport Road Suite 250
Carlsbad, CA 92011

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(760) 230-3061 (Fax)
info@coast-ins.com

Producing Agent Application for Appointment

Date: _____

Agency Name: _____

FEIN: _____ Year Agency Established: _____

Corporation Individual/Sole Proprietorship Partnership Other

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Toll Free: _____

Phone Number: _____ Fax Number: _____

E-Mail Address: _____

Principals: _____ Title: _____ Social Security Number *: _____

Principals: _____ Title: _____ Social Security Number *: _____

*please attach copies of driver's license

States Agency Licensed In: _____

Number of producing agents: _____

Name: _____ License: _____ State: _____

Name: _____ License: _____ State: _____

Name: _____ License: _____ State: _____

Name: _____ License: _____ State: _____

*If more than four please attach list

Number of employees: _____

Name of Licensed Surplus Lines Agent: _____

States Licensed In: _____ (please attach copies of licenses)

Producing Agent Application for Appointment (Continued)

Type of Agency: Wholesale Retail

Major Companies Represented: _____

Top Three Premium Finance Companies Used:

- 1) _____
- 2) _____
- 3) _____

Have you filed for business or individual bankruptcy in the past seven years? _____

Estimated Volume You Currently Write:

Commercial Trucking Liability: _____
Physical Damage: _____
General Liability: _____
Motor Truck Cargo: _____
Other: _____

Name of Current Errors & Omissions Carrier: _____

Limits: _____

Expiration Date: _____

** Please attach copy of errors & omissions declaration page*

By: _____

Signature of Principal: _____

Agency Name: _____

Signer's Title: _____